P.006

APPLICANT(S): LEWKOWICZ, Shlomo et al.

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REMARKS

The present response is intended to be fully responsive to all points of objection and/or rejection raised by the Examiner and is believed to place the application in condition for allowance. Favorable reconsideration and allowance of the application is respectfully requested.

Applicant asserts that the present invention is statutory, new, non-obvious and useful. Prompt consideration and allowance of the claims is respectfully requested.

Claims 24-37 are pending in the application.

In the Office Action, the Examiner rejected claims 24-37 under 35 U.S.C. § 102(b), as being anticipated by U.S. Patent No. 6,912,412 (Georgakoudi et al.). Applicants traverse the Examiner's rejection.

It is well established that, in order to successfully assert a prima facie case of anticipation, the Examiner must provide a single prior art document that includes every element and limitation of the claim or claims being rejected. Georgakoudi et al. purports to disclose utilizing a plurality of spectroscopic systems and methods to measure characteristics of tissue useful in the diagnosis of disease. In one embodiment, a combination of fluorescence, reflectance and light scattered spectra are purportedly measured and processed to provide biochemical, architectural and morphological state of tissue. However, Georgakoudi et al. do not teach all the claim limitations of the present claims.

Georgakoudi et al. do not disclose at least the steps of "administering to a patient an ingestible imaging capsule" and "wirelessly transmitting image data from the ingestible imaging capsule", as required by amended claim 24. Georgakoudi et al. do not mention the possibility of administering to a patient an ingestible imaging capsule or the possibility of wirelessly transmitting image data from the ingestible imaging capsule. Nor does the Examiner cite any portion of the Georgakoudi et al. reference wherein these features are taught.

In addition, the Examiner states that Georgakoudi et al. teach administering a fluorescent dye, and the Examiner cites lines 1-45 of column 9 without pointing to a specific line wherein this is supposedly taught. However, the step of "administering to a patient a composition

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comprising a fluorescent dye" is nowhere disclosed by Georgakoudi et al. At best, Georgakoudi et al. use a rotating filter or dye wheel (column 2, lines 35-37) or a dye laser (column 5, lines 3-12), from which the fluorescence light is collected (column 5, lines 22-28), and nowhere do Georgakoudi et al. disclose to administer a dye to the patient. At column 9, lines 1-45 cited by the Examiner, Georgakoudi et al. discuss the detection of the fluorescent signals, not administering a dye to the patient. Accordingly, the rejection of claim 24 should be withdrawn. Claims 25-31 depend from claim 24 and include all its limitations, and the rejection of claims 25-31 should thus also be withdrawn.

Moreover, Georgakoudi et al. do not disclose the steps of administering to a patient an in-vivo imaging capsule; activating illumination of the in-vivo imaging capsule in a flashing mode; or capturing light remitted from said cells onto a light detector within the in-vivo imaging capsule", as required by amended claim 35. Georgakoudi et al. do not mention the possibility of administering to a patient an in-vivo imaging capsule, the possibility of activating illumination of the in-vivo imaging capsule in a flashing mode, or the possibility of capturing light remitted from cells of an endo-luminal wall onto a light detector within the in-vivo imaging capsule. Nor does the Examiner cite any portion of the Georgakoudi et al. reference wherein these steps are taught.

In addition, the Examiner states that Georgakoudi et al. teach staining cells of an endoluminal wall at column 7, line 60 - column 9, line 45, with focus on column 9, lines 1-17. However, nowhere in these referenced portions of Georgakoudi et al. is the step of "staining cells of an endo-luminal wall" disclosed. In fact, Georgakoudi et al. explicitly describes at column 9, lines 1-17 that "the targets of fluorescence spectroscopy are tissue biochemicals such as NADH, FAD, collagen, elastin and porphyrins". Georgakoudi et al. refers to the detection of high-grade dysplasia using tissue autofluorescence as a way of differentiating between high-grade dysplastic and non-dysplastic tissues. Also, as discussed previously, Georgakoudi et al. use a rotating filter or dye wheel or a dye laser, and Georgakoudi et al. do not teach to stain the lumen wall.

Accordingly, the rejection of claim 35should be withdrawn. Claims 36-37 are dependent from claim 35 and include all its limitations. Accordingly, the rejection of claims 36-37 should also be withdrawn.

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Applicant reminds the Examiner that in order for a reference to anticipate a claim in a rejection under § 102(b), the reference must teach all elements of the claim. Georgakoudi et al does not disclose or suggest all of the steps of amended claims 24-31 and 35-37, and these claims should be allowed.

In view of the foregoing amendments and remarks, the pending claims are deemed to be allowable. Their favorable reconsideration and allowance is respectfully requested.

Should the Examiner have any question or comment as to the form, content or entry of this Amendment, the Examiner is requested to contact the undersigned at the telephone number below. Similarly, if there are any further issues yet to be resolved to advance the prosecution of this application to issue, the Examiner is requested to telephone the undersigned counsel.

Please charge any fees associated with this paper to deposit account No. 50-3355.

Respectfully submitted

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